

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

JOHN S FUND

ADDRESS (number and street)

1208 W Leland Avenue

☐Check if different  
than previously  
reported. (ACC)

Springfield

IL

62704

3547

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00390831

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jennifer Dillman

Signature of Treasurer

Electronically Filed by Jennifer Dillman

Date

01

11

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
JOHN S FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		11315.21
(b) Cash on Hand at Beginning of Reporting Period .....	31792.82	
(c) Total Receipts (from Line 19) .....	84236.18	142236.18
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	116029.00	153551.39
7. Total Disbursements (from Line 31) .....	79765.76	117288.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36263.24	36263.24
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
JOHN S FUND

Report Covering the Period:

From:

M M D D Y Y W Y  
0 7 0 1 2 0 0 7

To:

M M D D Y Y W Y  
1 2 3 1 2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	23850.00	27850.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1945.00	1945.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	25795.00	29795.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	58441.18	107441.18
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	84236.18	137236.18
12. Transfers From Affiliated/Other Party Committees .....	.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	84236.18	142236.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	84236.18	142236.18

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	38265.76	62788.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	38265.76	62788.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	41500.00	54500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	79765.76	117288.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79765.76	117288.15

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	84236.18	137236.18
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84236.18	137236.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38265.76	62788.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	38265.76	62788.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Russell Withers, Jr.

Mailing Address 3501 Broadway Street  
# 1508

City State Zip Code  
Mount Vernon IL 62864-2202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Withers Broadcasting

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-427-475-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Rodney Vaught

Mailing Address 132 Forest Grove Drive

City State Zip Code  
Glen Carbon IL 62034-1361

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AG Edwards

Occupation  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-424-471-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Cheryl Morley

Mailing Address 7 Ladue Lane

City State Zip Code  
Saint Louis MO 63124-1632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Monsanto

Occupation  
SVP Corporate Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-412-459-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

David Snively

Mailing Address 579 Sunbridge Drive

City

Chesterfield

State

MO

Zip Code

63017-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 8 / 2 0 0 7

Transaction ID: SA11AI-413-460-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

James Ware

Mailing Address 103 S Hickory Street

City

Farina

State

IL

Zip Code

62838-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-437-498-c

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Anita Rose

Mailing Address PO Box 9

City

Jerseyville

State

IL

Zip Code

62052-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PR Construction

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI-402-447-c

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Joseph Uram

Mailing Address 1 Northbridge Lane

City

Edwardsville

State

IL

Zip Code

62025-3844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cadenle Capital Group

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: SA11AI-407-451-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Bob Plummer

Mailing Address 514 E Vandalia Street

City

Edwardsville

State

IL

Zip Code

62025-1855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RP Lumber

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-409-454-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Clifton Baxter

Mailing Address 2104 Augusta Drive

City

Springfield

State

IL

Zip Code

62704-3103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Crawford, Murphy & Tilly

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: SA11AI-401-446-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Daulby

Mailing Address 2206 S Randolph Street

City

Arlington

State

VA

Zip Code

22204-5424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

Government Relations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: SA11AI-411-458-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Shih Chung Chang

Mailing Address 32 Briarcliffe Drive

City

Collinsville

State

IL

Zip Code

62234-2913

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-425-472-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Tom Allen

Mailing Address 55502 North State Route 159

City

Edwardsville

State

IL

Zip Code

62025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Fiber Comm LLC

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 7

Transaction ID: SA11AI-460-521-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Bill Olson

Mailing Address 507 Constitution Avenue NE  
Apt. 2

City State Zip Code  
Washington DC 20002-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIO

Occupation  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 0 7

Transaction ID: SA11AI-467-527-c

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Sam Geduldig

Mailing Address 1519 Pathfinder Lane

City State Zip Code  
Mc Lean VA 22101-3509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clark Lytle & Geduldig

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 7

Transaction ID: SA11AI-469-529-c

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Rabe

Mailing Address 19 Country Club Drive

City State Zip Code  
Edwardsville IL 62025-3708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boeing

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-438-499-c

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Grady Chronister

Mailing Address 2026 N Republic Street

City

Springfield

State

IL

Zip Code

62702-1850

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chronister Oil Co.

Occupation  
Exec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 7

Transaction ID: SA11AI-448-509-c

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Holloway

Mailing Address 3 Northbridge Circle

City

Edwardsville

State

IL

Zip Code

62025-3842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bank of Edwardsville

Occupation  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI-458-519-c

Amount of Each Receipt this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)

Loren Klaus

Mailing Address 204 Glenwood Court

City

Glen Carbon

State

IL

Zip Code

62034-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 7

Transaction ID: SA11AI-442-503-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Stanley Soldner

Mailing Address 216 RR 2

City

Farina

State

IL

Zip Code

62838-9490

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI-399-444-c

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Tom Long

Mailing Address 3112 Godfrey Road

City

Godfrey

State

IL

Zip Code

62035-1855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-436-497-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

H.W. Knapheide

Mailing Address PO Box 7140

City

Quincy

State

IL

Zip Code

62305-7140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Knapheide Trucking

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: SA11AI-435-494-c

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Alan Gaffner

Mailing Address 1301 Killarney Drive

City

Greenville

State

IL

Zip Code

62246-1327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Utlaut Health Systems

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-439-500-c

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Gary Niehaus

Mailing Address 608 W Coolidge Avenue

City

Charleston

State

IL

Zip Code

61920-3813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hawthorne School

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-440-501-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Schmidt

Mailing Address 208 E. Third St.

City

St. Jacob

State

IL

Zip Code

62281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Home Telephone Co.

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 1 / 2 0 0 7

Transaction ID: SA11AI-430-478-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

David Oates

Mailing Address 21 Pineridge Court

City

Edwardsville

State

IL

Zip Code

62025-3828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oates & Assoc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-433-488-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Raymond Fitzgerald

Mailing Address 1465 Briergate Drive

City

Naperville

State

IL

Zip Code

60563-2211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Trucking

Occupation  
Government Relations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-434-489-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Mestemacher

Mailing Address 4775 S Hazel Road

City

Edwardsville

State

IL

Zip Code

62025-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 7

Transaction ID: SA11AI-421-468-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Carol Mestemacher

Mailing Address 4775 S Hazel Road

City

Edwardsville

State

IL

Zip Code

62025-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-426-474-c

Amount of Each Receipt this Period

950.00

**B.**

Full Name (Last, First, Middle Initial)

Lois Olson

Mailing Address PO Box 147

City

Elkhart

State

IL

Zip Code

62634-0147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation

Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-428-485-c

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Richard McGraw

Mailing Address 30 Arrowhead Circle

City

Litchfield

State

IL

Zip Code

62056-4233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McDonalds

Occupation

Licensee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 2 / 2 0 0 7

Transaction ID: SA11AI-416-463-c

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Doris Long

Mailing Address 2489 Seminary Road

City

Brighton

State

IL

Zip Code

62012-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 7

Transaction ID: SA11AI-417-464-c

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Mestemacher

Mailing Address 4775 S Hazel Road

City

Edwardsville

State

IL

Zip Code

62025-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-421-473-c

Amount of Each Receipt this Period

1800.00

**C.**

Full Name (Last, First, Middle Initial)

Donald Weder

Mailing Address 1111 6th Street

City

Highland

State

IL

Zip Code

62249-1408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Highland Supply Corp

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI-398-443-c

Amount of Each Receipt this Period

2300.00

**SUBTOTAL** of Receipts This Page (optional) .....

4350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Charlene Turczyn

Mailing Address 225 Wild Rose Lane

City

Rochester

State

IL

Zip Code

62563-9225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CMW & Assoc

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: SA11AI-406-450-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Janet Holloway

Mailing Address 23 Conway Lane

City

Saint Louis

State

MO

Zip Code

63124-1280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-415-462-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Brenda Hebrank

Mailing Address 18 Willow Creek Drive

City

Highland

State

IL

Zip Code

62249-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 7

Transaction ID: SA11AI-393-438-c

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Doug Hartmann, Sr.

Mailing Address 2013 Raintree Trail

City

Collinsville

State

IL

Zip Code

62234-5239

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartmann Realtors

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 7

Transaction ID: SA11AI-394-439-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

William Schrimpf

Mailing Address 3838 Omega Street

City

Alton

State

IL

Zip Code

62002-2100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Piassa Management Co, LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI-396-442-c

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Martin Davis

Mailing Address 401 W Spresser Street

City

Taylorville

State

IL

Zip Code

62568-1853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rodebrad of Taylorville

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI-199-486-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Brendan Kelsay

Mailing Address 210 S Cleveland Street

City

Arlington

State

VA

Zip Code

22204-2072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clear Channel Worldwide

Occupation

Government Affairs Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI-391-436-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Roger Schuerbaum

Mailing Address 1770 Triad Road

City

Saint Jacob

State

IL

Zip Code

62281-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: SA11AI-392-437-c

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

23850.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 57

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

American Soybean Association Pac (soypac)

Mailing Address 12125 Woodcrest Executive Drive  
Suite 100City State Zip Code  
Saint Louis MO 63141-5009FEC ID number of contributing  
federal political committee. **C** C00408468

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	7	/	2	0	0	7

Transaction ID: SA11C-410-455-c

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Reliant Energy Inc.Political Action Committee

Mailing Address PO Box 148

City State Zip Code  
Houston TX 77001-0148FEC ID number of contributing  
federal political committee. **C** C00081455

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: SA11C-501-580-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Calpine Corporation Pac

Mailing Address 50 W San Fernando Street

City State Zip Code  
San Jose CA 95113-2429FEC ID number of contributing  
federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11C-502-583-c

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Physical Therapy PAC (PT-PAC)

Mailing Address 1111 N Fairfax Street

City

Alexandria

State

VA

Zip Code

22314-1484

FEC ID number of contributing  
federal political committee.

**C** C00012880

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 7

Transaction ID: SA11C-162-491-c

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Printing Industries Of America

Mailing Address 601 13th Street NW  
Suite 360

City

Washington

State

DC

Zip Code

20005-3807

FEC ID number of contributing  
federal political committee.

**C** C00018028

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 7

Transaction ID: SA11C-465-526-c

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Institute Of Scrap Recycling Industries Inc. Political Action Committee

Mailing Address 1615 L Street NW  
Suite 600

City

Washington

State

DC

Zip Code

20036-5664

FEC ID number of contributing  
federal political committee.

**C** C00046086

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 7

Transaction ID: SA11C-470-530-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

American Association Of Oral And Maxillofacial Surgeons Political Action Committee

Mailing Address 9700 Bryn Mawr Avenue

City

Rosemont

State

IL

Zip Code

60018-5701

FEC ID number of contributing  
federal political committee.

**C** C00005660

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11C-485-556-c

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Peabody Energy Corporation Political Action Committee (peabody Pac)

Mailing Address 701 Market Street

City

Saint Louis

State

MO

Zip Code

63101-1830

FEC ID number of contributing  
federal political committee.

**C** C00110478

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: SA11C-457-518-c

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Freedom Project; The

Mailing Address 509 7th Street NW  
Floor 3

City

Washington

State

DC

Zip Code

20004-1600

FEC ID number of contributing  
federal political committee.

**C** C00305805

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.18

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11C-462-523-i

Amount of Each Receipt this Period

441.18

In-Kind: ground transporta-  
tion; bus and

**SUBTOTAL** of Receipts This Page (optional) .....

3441.18

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 57

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Washington Group International Political Action Committee

Mailing Address 2345 Crystal Drive  
Suite 708City State Zip Code  
Arlington VA 22202-4801FEC ID number of contributing  
federal political committee. **C** C00097550

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Transaction ID: SA11C-464-524-c

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Bryan Cave Llp Political Action Committee

Mailing Address 700 13th Street NW  
Suite 700City State Zip Code  
Washington DC 20005-6619FEC ID number of contributing  
federal political committee. **C** C00332643

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	0	7

Transaction ID: SA11C-431-484-c

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Society Of Thoracic Surgeons Political Action Committee

Mailing Address 1025 Connecticut Avenue NW  
Suite 1104City State Zip Code  
Washington DC 20036-5448FEC ID number of contributing  
federal political committee. **C** C00325936

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	7

Transaction ID: SA11C-455-513-c

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) .....

5500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Peabody Energy Corporation Political Action Committee (peabody Pac)

Mailing Address 701 Market Street

City

Saint Louis

State

MO

Zip Code

63101-1830

FEC ID number of contributing  
federal political committee.

**C** C00110478

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: SA11C-457-585-c

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

AZ PAC (Zeneca, Inc. PAC)

Mailing Address 1800 Concord Pike  
P.O. Box 15438

City

Wilmington

State

DE

Zip Code

19850-5438

FEC ID number of contributing  
federal political committee.

**C** C00279455

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11C-170-564-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Electrical Construction Pac-National Electrical Contractors Association, Inc (ecpac)

Mailing Address 3 Bethesda Metro Center  
Suite 1100

City

Bethesda

State

MD

Zip Code

20814-6302

FEC ID number of contributing  
federal political committee.

**C** C00113811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: SA11C-408-453-c

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Electrical Construction Pac-National Electrical Contractors Association, Inc (ecpac)

Mailing Address 3 Bethesda Metro Center  
Suite 1100

City State Zip Code  
Bethesda MD 20814-6302

FEC ID number of contributing  
federal political committee.

**C** C00113811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11C-408-582-c

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328-3474

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 7

Transaction ID: SA11C-354-514-c

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328-3474

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 0 7

Transaction ID: SA11C-354-525-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

AZ PAC (Zeneca, Inc. PAC)

Mailing Address 1800 Concord Pike  
P.O. Box 15438

City State Zip Code  
Wilmington DE 19850-5438

FEC ID number of contributing  
federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11C-170-512-c

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

KOCHPAC

Mailing Address 655 15th Street NW  
Suite 445

City State Zip Code  
Washington DC 20005-5727

FEC ID number of contributing  
federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 7

Transaction ID: SA11C-316-435-c

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

KOCHPAC

Mailing Address 655 15th Street NW  
Suite 445

City State Zip Code  
Washington DC 20005-5727

FEC ID number of contributing  
federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11C-316-567-c

Amount of Each Receipt this Period

3500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)  
EPSA PAC

Mailing Address 1401 New York Avenue NW  
Floor 11

City State Zip Code  
Washington DC 20005-2102

FEC ID number of contributing  
federal political committee. **C** C00326009

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 7

Transaction ID: SA11C-339-578-c

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mirant Corporation Federal PAC

Mailing Address 1155 Perimeter Center W  
Floor 10

City State Zip Code  
Atlanta GA 30338-5463

FEC ID number of contributing  
federal political committee. **C** C00365007

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 7

Transaction ID: SA11C-233-579-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Society of American Florists PAC

Mailing Address 1601 Duke Street

City State Zip Code  
Alexandria VA 22314-3406

FEC ID number of contributing  
federal political committee. **C** C00111302

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 7

Transaction ID: SA11C-265-492-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 57

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Suez Energy North America PAC

Mailing Address 1990 Post Oak Boulevard  
Suite 1900

City	State	Zip Code
Houston	TX	77056-3831

FEC ID number of contributing  
federal political committee. **C** C00375568

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	1 5	/	2 0 0 7

Transaction ID: SA11C-266-542-c

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Enterprise Rent A Car Company PAC

Mailing Address 600 Corporate Park Drive

City	State	Zip Code
Saint Louis	MO	63105-4204

FEC ID number of contributing  
federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 8	/	2 7	/	2 0 0 7

Transaction ID: SA11C-225-452-c

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Ameren Fed PAC

Mailing Address 607 E Adams Street

City	State	Zip Code
Springfield	IL	62739-0001

FEC ID number of contributing  
federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 8	/	2 2	/	2 0 0 7

Transaction ID: SA11C-158-457-c

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Chicago Mercantile Exchange PAC (CME/PAC)

Mailing Address 20 S Wacker Drive

City

Chicago

State

IL

Zip Code

60606-7408

FEC ID number of contributing  
federal political committee.

**C** C00076299

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: SA11C-174-539-c

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Constellation Energy Federal PAC

Mailing Address 750 E Pratt Street  
Floor 5

City

Baltimore

State

MD

Zip Code

21202-3142

FEC ID number of contributing  
federal political committee.

**C** C00041376

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: SA11C-153-543-c

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Public Service Enterprise Group, Inc. PAC

Mailing Address 80 Park Plaza

City

Newark

State

NJ

Zip Code

07102-4109

FEC ID number of contributing  
federal political committee.

**C** C00214940

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11C-167-581-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

MWH Political Action Committee

Mailing Address 380 Interlocken Crescent  
Suite 200

City State Zip Code  
Broomfield CO 80021-8026

FEC ID number of contributing  
federal political committee. **C** C00242370

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: SA11C-185-456-c

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Exelon PAC

Mailing Address PO Box 805379

City State Zip Code  
Chicago IL 60680-4115

FEC ID number of contributing  
federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA11C-109-584-c

Amount of Each Receipt this Period

3500.00

**C.**

Full Name (Last, First, Middle Initial)

College of American Pathologists PAC

Mailing Address 1350 I Street NW  
Suite 590

City State Zip Code  
Washington DC 20005-3305

FEC ID number of contributing  
federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: SA11C-138-493-c

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 57

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

American Association of Nurse Anesthetists CRNA PAC

Mailing Address 412 1st Street SE  
Suite 12

City State Zip Code  
Washington DC 20003-1804

FEC ID number of contributing  
federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 27 2007

Transaction ID: SA11C-146-515-c

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

QWEST COMMUNICATIONS INTERNATIONAL INC POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW  
Suite 950

City State Zip Code  
Washington DC 20005-2030

FEC ID number of contributing  
federal political committee. **C** C00237156

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2007

Transaction ID: SA11C-69-495-c

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)

Mailing Address Five Moore Drive  
P.O. Box 13358

City State Zip Code  
Res. Triangle Park NC 27709

FEC ID number of contributing  
federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2007

Transaction ID: SA11C-102-496-c

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 57

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Exelon PAC

Mailing Address PO Box 805379

City

Chicago

State

IL

Zip Code

60680-4115

FEC ID number of contributing  
federal political committee.**C** C00141218

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	7

Transaction ID: SA11C-109-516-c

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

58441.18



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
JOHN S FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) National City Bank</p> <p>Mailing Address 51189 Shelby Parkway</p> <p>City Shelby Twp State MI Zip Code 48315-1786</p> <p>Purpose of Disbursement Other: credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-36-562-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="39.99"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) National City Bank</p> <p>Mailing Address 51189 Shelby Parkway</p> <p>City Shelby Twp State MI Zip Code 48315-1786</p> <p>Purpose of Disbursement Fundraising: postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-36-551-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.90"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Epiphany Productions</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301-1015</p> <p>Purpose of Disbursement Fundraising: PAC Fundraising expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-192-440-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2211.63"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2288.52**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-535-e <b>Date of Disbursement</b>
Mailing Address 1208 W Leland Avenue	<div> <div><sup>M</sup>0</div> <div><sup>M</sup>8</div> <div>/</div> <div><sup>D</sup>3</div> <div><sup>D</sup>1</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>7</div> </div>
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PAC finances and reports Candidate Name	<div>200.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-553-e <b>Date of Disbursement</b>
Mailing Address 1208 W Leland Avenue	<div> <div><sup>M</sup>0</div> <div><sup>M</sup>9</div> <div>/</div> <div><sup>D</sup>2</div> <div><sup>D</sup>8</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>7</div> </div>
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement pac reports and finances Candidate Name	<div>200.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-433-e <b>Date of Disbursement</b>
Mailing Address 1208 W Leland Avenue	<div> <div><sup>M</sup>0</div> <div><sup>M</sup>7</div> <div>/</div> <div><sup>D</sup>2</div> <div><sup>D</sup>7</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>7</div> </div>
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement pac finances and reporting fees Candidate Name	<div>200.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**600.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-552-e <b>Date of Disbursement</b>																				
Mailing Address 1208 W Leland Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement pac admin fees for finance and reports Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-561-e <b>Date of Disbursement</b>																				
Mailing Address 1208 W Leland Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	0	7												
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement reporting and finances Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jen Dillman Consulting	<b>Transaction ID:</b> SB21B-255-565-e <b>Date of Disbursement</b>																				
Mailing Address 1208 W Leland Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	6		2	0	0	7												
City Springfield State IL Zip Code 62704-3547	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement pac reports and finances Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**600.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-480-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 7</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>200.00</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-431-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 7</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>200.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement credit card processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-490-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 7</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>131.25</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**531.25**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-520-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-441-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-566-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p><input type="text" value="001"/> Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**415.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-541-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement reporting software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-554-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement Fundraising: pac fundraiser catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-360-44-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="113.58"/></p> <p>003 Category/ Type</p> <p><b>[MEMO ITEM]</b> Subitemization of 3 Dog Consulting, Ltd</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**400.00**

**TOTAL** This Period (last page this line number only) ..... ►

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
JOHN S FUND

Subitemization of 3 Dog Consulting, Ltd

1108.24

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster Mailing Address 1100 Wythe Street	<b>Transaction ID:</b> SB21B-386-34-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 0 / 2 0 0 7</div> </div>
City Alexandria State VA Zip Code 22314-1843 Purpose of Disbursement Fundraising: PAC Fundraiser postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>533.00</div> <b>[MEMO ITEM]</b> Subitemization of 3 Dog Consulting, Ltd
<b>B.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 3301 Jefferson Davis Highway City Alexandria State VA Zip Code 22305-3044 Purpose of Disbursement Fundraising: PAC fundraiser invites Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-387-36-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>52.10</div> <b>[MEMO ITEM]</b> Subitemization of 3 Dog Consulting, Ltd
<b>C.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 3301 Jefferson Davis Highway City Alexandria State VA Zip Code 22305-3044 Purpose of Disbursement Fundraising: PAC Fundraiser invites Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-387-37-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>38.09</div> <b>[MEMO ITEM]</b> Subitemization of 3 Dog Consulting, Ltd

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> SB21B-387-35-V <b>Date of Disbursement</b>
Mailing Address 3301 Jefferson Davis Highway	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 7</div> </div>
City Alexandria State VA Zip Code 22305-3044	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising: PAC fundraiser invites Candidate Name	<div> <div>171.80</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>003</div> <div>Category/Type</div> </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of 3 Dog Consulting, Ltd
<b>B.</b> Full Name (Last, First, Middle Initial) Faller Photography Group	<b>Transaction ID:</b> SB21B-461-522-e <b>Date of Disbursement</b>
Mailing Address 110A Cottonwood Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 4 / 2 0 0 7</div> </div>
City Glen Carbon State IL Zip Code 62034-2746	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising: PAC Fundraiser Photography Candidate Name	<div> <div>517.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>003</div> <div>Category/Type</div> </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Freedom Project; The	<b>Transaction ID:</b> SB21B-462-523-i <b>Date of Disbursement</b>
Mailing Address 509 7th Street NW Floor 3	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 9 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20004-1600	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Name	<div> <div>441.18</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div></div> <div>Category/Type</div> </div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Inkind: ground transportation; bus and driver

**SUBTOTAL** of Disbursements This Page (optional) .....

**958.18**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Fundraising: PAC Fundraising Retainer  
Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-193-33-V

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

3500.00

**[MEMO ITEM]**

Subitemization of 3 Dog Consulting, Ltd

**B.**

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Fundraising: PAC fundraising expenses  
Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-193-434-e

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

5063.45

**C.**

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Fundraising: pac fundraising retainer  
Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-193-47-V

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

3500.00

**[MEMO ITEM]**

Subitemization of 3 Dog Consulting, Ltd

**SUBTOTAL** of Disbursements This Page (optional) .....

5063.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City  
Alexandria

State  
VA

Zip Code  
22301-1015

Purpose of Disbursement  
Fundraising: pac fundraising retainer

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-193-43-V

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

3500.00

## **[MEMO ITEM]**

Subitemization of 3 Dog Consulting, Ltd

B.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City  
Alexandria

State  
VA

Zip Code  
22301-1015

Purpose of Disbursement  
Fundraising: PAC fundraising retainer

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-193-482-e

Date of Disbursement

09 / 10 / 2007

Amount of Each Disbursement this Period

3500.00

C.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City  
Alexandria

State  
VA

Zip Code  
22301-1015

Purpose of Disbursement

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-193-483-e

Date of Disbursement

09 / 10 / 2007

Amount of Each Disbursement this Period

270.79

PAC expens for blast fax & conference call

**SUBTOTAL** of Disbursements This Page (optional) .....

3770.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Fundraising: PAC Fundraising expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-193-425-e

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

3743.87

B.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Fundraising: pac fundraising expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-193-563-e

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

3830.35

C.

Full Name (Last, First, Middle Initial)

3 Dog Consulting, Ltd

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
PAC Fundraising Retainer and expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-193-538-e

Date of Disbursement

09 / 30 / 2007

Amount of Each Disbursement this Period

5738.34

SUBTOTAL of Disbursements This Page (optional) .....

13312.56

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 57

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) 3 Dog Consulting, Ltd	<b>Transaction ID:</b> SB21B-193-555-e <b>Date of Disbursement</b>																				
Mailing Address 104 Hume Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	1	/	2	0	0	7												
City Alexandria State VA Zip Code 22301-1015	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising: pac fundraising expenses Candidate Name	<table border="1"> <tr> <td colspan="10">3809.46</td> </tr> </table>	3809.46																			
3809.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sunset Hills Country Club	<b>Transaction ID:</b> SB21B-390-550-e <b>Date of Disbursement</b>																				
Mailing Address 2525 Hwy 157 South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	0	/	2	0	0	7												
City Edwardsville State IL Zip Code 62025	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising: PAC Fundraiser catering Candidate Name	<table border="1"> <tr> <td colspan="10">1174.31</td> </tr> </table>	1174.31																			
1174.31																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Sunset Hills Country Club	<b>Transaction ID:</b> SB21B-390-481-e <b>Date of Disbursement</b>																				
Mailing Address 2525 Hwy 157 South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9	/	1	0	/	2	0	0	7												
City Edwardsville State IL Zip Code 62025	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising: PAC Fundraiser Catering Candidate Name	<table border="1"> <tr> <td colspan="10">3832.00</td> </tr> </table>	3832.00																			
3832.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**8815.77**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)

Sunset Hills Country Club

Mailing Address 2525 Hwy 157 South

City State Zip Code  
Edwardsville IL 62025

Purpose of Disbursement  
Fundraising: PAC Fundraiser Deposit

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-390-40-V

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2007

Amount of Each Disbursement this Period

600.00

**[MEMO ITEM]**

Subitemization of 3 Dog  
Consulting, Ltd

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

38079.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF MIKE FERGUSON

Mailing Address c/o Ron Gravino P.O. Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement  
Political Contribution: contributionCandidate Name  
Mike Ferguson011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: SB23-59-427-e

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESSMailing Address 3161 Dixie Highway  
Suite F

City Erlanger State KY Zip Code 41018-1841

Purpose of Disbursement  
Political Contribution: contributionCandidate Name  
Geoff Davis011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District: 04

Transaction ID: SB23-60-571-e

Date of Disbursement

M M / D D / Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
GRAVES FOR CONGRESS

Mailing Address 4701 NW 82nd Street

City Kansas City State MO Zip Code 64151-1102

Purpose of Disbursement  
Political Contribution: contributionCandidate Name  
Sam Graves011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: SB23-93-533-e

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS	<b>Transaction ID:</b> SB23-97-428-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 442	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	0	7												
City Allentown State PA Zip Code 18105-0442	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution Candidate Name Charles Dent	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF DAVE REICHERT	<b>Transaction ID:</b> SB23-98-570-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 53322	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	7												
City Bellevue State WA Zip Code 98015-3322	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution Candidate Name Dave Reichert	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Gard for Congress	<b>Transaction ID:</b> SB23-253-547-e <b>Date of Disbursement</b>																				
Mailing Address 1915 S Webster Avenue Suite D	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Green Bay State WI Zip Code 54301-5200	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution Candidate Name John Gard	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Bachmann for Congress	<b>Transaction ID:</b> SB23-286-569-e <b>Date of Disbursement</b>
Mailing Address PO Box 49756	<div> <div>12</div> <div>21</div> <div>2007</div> </div>
City Minneapolis State MN Zip Code 55449-0756	Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution: contribution	<div>1000.00</div>
Candidate Name Michele Bachmann	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sali for Congress	<b>Transaction ID:</b> SB23-303-574-e <b>Date of Disbursement</b>
Mailing Address PO Box 71	<div> <div>12</div> <div>21</div> <div>2007</div> </div>
City Kuna State ID Zip Code 83634-0071	Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution: contribution	<div>1000.00</div>
Candidate Name William Sali	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Walsh for Congress	<b>Transaction ID:</b> SB23-343-576-e <b>Date of Disbursement</b>
Mailing Address 306 Winkworth Parkway	<div> <div>12</div> <div>24</div> <div>2007</div> </div>
City Syracuse State NY Zip Code 13215-1550	Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution: contribution	<div>1000.00</div>
Candidate Name James Walsh	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Walsh for Congress	<b>Transaction ID:</b> SB23-343-429-e <b>Date of Disbursement</b>																				
Mailing Address 306 Winkworth Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	0	7												
City Syracuse State NY Zip Code 13215-1550	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name James Walsh	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: NY District: 25 <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Kirk for Congress	<b>Transaction ID:</b> SB23-352-575-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 8	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	7												
City Winnetka State IL Zip Code 60093-0008	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Mark Kirk	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 10 <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kirk for Congress	<b>Transaction ID:</b> SB23-352-534-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 8	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	7												
City Winnetka State IL Zip Code 60093-0008	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Candidate Name Mark Kirk	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 10 <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Kirk for Congress	<b>Transaction ID:</b> SB23-352-426-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 8	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	0	7												
City Winnetka State IL Zip Code 60093-0008	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Mark Kirk	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 10 <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Rocque For Congress Committee	<b>Transaction ID:</b> SB23-378-537-e <b>Date of Disbursement</b>																				
Mailing Address 2 Potter Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	7												
City Whitehall State NY Zip Code 12887-1304	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Michael R Rocque	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: NY District: 20 <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Heller For Congress	<b>Transaction ID:</b> SB23-384-430-e <b>Date of Disbursement</b>																				
Mailing Address 7840 Red Leaf Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	0	7												
City Las Vegas State NV Zip Code 89131-5005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Contribution: contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Dean Heller	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: NV District: 01 <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Schock for Congress Mailing Address PO Box 10555	<b>Transaction ID:</b> SB23-471-531-e <b>Date of Disbursement</b> <div> <div>09</div> <div>25</div> <div>2007</div> </div>
City Peoria State IL Zip Code 61612-0555 Purpose of Disbursement Political Contribution: contribution Candidate Name Aaron Schock Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: IL District: 18	<b>Amount of Each Disbursement this Period</b> <div>5000.00</div> <div>011</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Donald A. Manzullo For Congress Mailing Address PO Box 7783 City Rockford State IL Zip Code 61126-7783 Purpose of Disbursement Political Contribution: contribution Candidate Name Donald A. Manzullo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: IL District: 16	<b>Transaction ID:</b> SB23-474-532-e <b>Date of Disbursement</b> <div>09</div> <div>25</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Baldermann for Congress Mailing Address PO Box 2862 City Joliet State IL Zip Code 60434-2862 Purpose of Disbursement Political Contribution: contribution Candidate Name Tim Balderman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: IL District: 11	<b>Transaction ID:</b> SB23-478-544-e <b>Date of Disbursement</b> <div>10</div> <div>26</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div> <div>011</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)  
Women Impacting the Nation

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-479-545-e  
Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
People With Hart Inc

Mailing Address PO Box 435

City Wexford State PA Zip Code 15090-0435

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Melissa A. Hart

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 04

Transaction ID: SB23-482-548-e  
Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)  
Jeb Bradley For Congress

Mailing Address 645 S Main Street

City Wolfeboro State NH Zip Code 03894-4419

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Joseph E Mr Bradley, III

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: SB23-484-549-e  
Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Latta For Congress Mailing Address 300 N Main Street	<b>Transaction ID:</b> SB23-487-557-e <b>Date of Disbursement</b> <div> <div>11</div> <div>12</div> <div>2007</div> </div>
City Bowling Green State OH Zip Code 43402-2423 Purpose of Disbursement Political Contribution: contribution Candidate Name Robert Edward Latta Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: OH District: 05 Special	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Rob Wittman For Congress Mailing Address PO Box 999 City Montross State VA Zip Code 22520-0999 Purpose of Disbursement Political Contribution: contribution Candidate Name Rob Wittman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: VA District: 01 Special	<b>Transaction ID:</b> SB23-489-558-e <b>Date of Disbursement</b> <div>11</div> <div>12</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Dan Burton For Congress Committee Mailing Address PO Box 50593 City Indianapolis State IN Zip Code 46250-0593 Purpose of Disbursement Political Contribution: contribution Candidate Name Danny L Burton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 05	<b>Transaction ID:</b> SB23-491-560-e <b>Date of Disbursement</b> <div>11</div> <div>12</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)  
John Shadeggs Friends

Mailing Address PO Box 45444

City Phoenix State AZ Zip Code 85064-5444

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
John B. Shadegg

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 03

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-496-568-e  
Date of Disbursement

12 / 21 / 2007

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
Stivers For Congress

Mailing Address 81 S 5th Street

City Columbus State OH Zip Code 43215-4323

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Steve Stivers

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 15

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-498-573-e  
Date of Disbursement

12 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Gilchrest For Congress

Mailing Address PO Box 644

City Chestertown State MD Zip Code 21620-0644

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Wayne T Gilchrest

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MD District: 01

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-506-586-e  
Date of Disbursement

12 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Dean Andal for Congress Mailing Address PO Box 1067	<b>Transaction ID:</b> SB23-480-546-e <b>Date of Disbursement</b> <div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Stockton State CA Zip Code 95201-1067 Purpose of Disbursement Political Contribution: contribution Candidate Name Dean Andal Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: CA District: 11	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>011</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Knollenberg For Congress Committee Mailing Address 31000 Telegraph Road Suite 110 City Bingham Farms State MI Zip Code 48025-4321 Purpose of Disbursement Political Contribution: contribution Candidate Name Joseph K. Knollenberg Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: MI District: 09	<b>Transaction ID:</b> SB23-493-559-e <b>Date of Disbursement</b> <div> <div>11</div> <div>12</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) People For English Mailing Address PO Box 1940 City Erie State PA Zip Code 16507-0940 Purpose of Disbursement Political Contribution: contribution Candidate Name Philip S. English Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: PA District: 03	<b>Transaction ID:</b> SB23-477-572-e <b>Date of Disbursement</b> <div> <div>12</div> <div>21</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)  
People For English

Mailing Address PO Box 1940

City Erie State PA Zip Code 16507-0940

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Philip S. English

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 03

Transaction ID: SB23-477-536-e  
Date of Disbursement

09 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Committee To Re-Elect Vito Fossella

Mailing Address PO Box 120197

City Staten Island State NY Zip Code 10312-0197

Purpose of Disbursement  
Political Contribution: contribution

Candidate Name  
Vito Fossella

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 13

Transaction ID: SB23-500-577-e  
Date of Disbursement

12 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

41500.00